## DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/11/2013 FORM APPROVED OMB NO. 0938-0391

NAME OF PROVIDER OR SUPPLIER  LIFE DESIGNS INC  SUBMACY STREET ADDRESS, CITY, STATE JP CODE  1255 SHIGHLAND AVENUE  BLOOMINGTON, IN 47461  OCAL ID PRETEX  JECH DESIGNS INC  SUBMACY STATELEMENT OF DEFICIENCIES  IPPOTUBES PLAN OF CORRECTION  REGULATORY OF LSC BENTYTHING INFORMATION)  K 000  INITIAL COMMENTS  A Life Safety Code Certification and Environmental Presoccupancy Survey for a replacement home was conducted by the Indiana State Department of Health in accordance with 42  CFR 483-470(j), Life Safety Code and Environmental Presoccupancy Survey, Life Designs Inc. was found in compliance with Requirements for Participation in Medical 42 CFR Subpart 483-470(j), Life Safety Code (LSC), Chapter 32, New Residential Board and Care Occupancies and with 410 IAC 9, Community Residential Facilities for persons with Developmental Disabilities.  This one story facility with a basement was sprinklered. The facility has a large atom with system with smoke detection in the corridors, common living areas and hard wired smoke detectors in all client rooms. The facility has a capacity of six and had a census of zero at the time of this survey.  Calculation of the Evacuation Difficulty Score (E-Score) from the previous facility using NFPA	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION			(X3) DATE SURVEY COMPLETED	
NAME OF PROVIDER OR SUPPLIER  LIFE DESIGNS INC    CALL   DESIGNATION   DESTRUCTION OF LIFE PROCESS.   STREET ADDRESS, CITY, STATE, JPP CODE 1825 S HIGHLAND AVENUE BLOOMINGTON, IN 47401    CALL   DESTRUCTION OF USE TESTRECTOR PLANT IN 1825 I SENTIFY OF USE TESTRET OF USE			IDENTIFICATION NOMBER.	A. BUILDING 02		G <b>02</b>	OOWII LETED	
LIFE DESIGNS INC    1825 S HIGHARD AVENUE			15G268	B. WIN	IG_		01/04/2013	
PREFIX TAG  REGULATORY OR ISC IDENTIFYING INFORMATION)  K 000  INITIAL COMMENTS  A Life Safety Code Certification and Environmental Preoccupancy Survey for a replacement home was conducted by the indiana State Department of Health in accordance with 42 CPR 483.470(j).  Survey Date: 01/04/13  Facility Number: 000788 Provider Number: 15G288 AIM Number: 100243600  Surveyor: Phillip Komsiski, Life Safety Code Specialist  At this Life Safety Code and Environmental Preoccupancy Life Designs Inc. was found in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety of Community Residential Facilities for persons with Developmental Disabilities.  This one story facility with a basement was sprinklered. The facility has a fire alarm system with smoke detection in the corridors, common living areas and hard wired smoke detectors in all client rooms. The facility has a capacity of six and had a census of zero at the time of this survey.  Calculation of the Evacuation Difficulty Score (E-Score) from the PREFIX TAG.  K 000  K						1825 S HIGHLAND AVENUE		
A Life Safety Code Certification and Environmental Preoccupancy Survey for a replacement home was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.470().  Survey Date: 01/04/13  Facility Number: 000788 Provider Number: 15G268 AIM Number: 100243600  Surveyor: Phillip Komsiski, Life Safety Code Specialist  At this Life Safety Code and Environmental Preoccupancy survey, Life Designs inc. was found in compliance with Requirements for Participation in Medicaid, 42 CFR subpart 483.470(), Life Safety Form Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 32, New Residential Board and Care Occupancies and with 410 IAC 9, Community Residential Facilities for persons with Developmental Disabilities.  This one story facility with a basement was sprinklered. The facility has a fire alarm system with smoke detection in the corridors, common living areas and hard wired smoke detectors in all client rooms. The facility has a capacity of six and had a census of zero at the time of this survey.  Calculation of the Evacuation Difficulty Score (E-Score) from the previous facility using NFPA	PREFIX	(EACH DEFICIENCY MUST BE PRECEDED BY FULL		PREFIX (EACH CORRECTIVE ACTION TAG CROSS-REFERENCED TO THE		(EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO	HOULD BE COMPLETION	
Environmental Preoccupancy Survey for a replacement home was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.470(j).  Survey Date: 01/04/13  Facility Number: 000788 Provider Number: 15c268 AIM Number: 100243600  Surveyor: Phillip Komsiski, Life Safety Code Specialist  At this Life Safety Code and Environmental Preoccupancy survey, Life Designs Inc. was found in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Ged (LSC), Chapter 32, New Residential Board and Care Occupancies and with 410 IAC 9, Community Residential Facilities for persons with Developmental Disabilities.  This one story facility with a basement was sprinklered. The facility has a fire alarm system with snoke detection in the corridors, common living areas and hard wired smoke detectors in all client rooms. The facility has a capacity of six and had a census of zero at the time of this survey.  Calculation of the Evacuation Difficulty Score (E-Score) from the previous facility using NFPA	K 000	A Life Safety Code Certification and Environmental Preoccupancy Survey for a replacement home was conducted by the Indiana State Department of Health in accordance with 42		к	000			
Facility Number: 000788 Provider Number: 150268 AIM Number: 100243600  Surveyor: Phillip Komsiski, Life Safety Code Specialist  At this Life Safety Code and Environmental Preoccupancy survey, Life Designs Inc. was found in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 32, New Residential Board and Care Occupancies and with 410 IAC 9, Community Residential Facilities for persons with Developmental Disabilities.  This one story facility with a basement was sprinklered. The facility has a fire alarm system with smoke detection in the corridors, common living areas and hard wired smoke detectors in all client rooms. The facility has a capacity of six and had a census of zero at the time of this survey.  Calculation of the Evacuation Difficulty Score (E-Score) from the previous facility using NFPA								
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Specialist  At this Life Safety Code and Environmental Preoccupancy survey, Life Designs Inc. was found in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 32, New Residential Board and Care Occupancies and with 410 IAC 9, Community Residential Facilities for persons with Developmental Disabilities.  This one story facility with a basement was sprinklered. The facility has a fire alarm system with smoke detection in the corridors, common living areas and hard wired smoke detectors in all client rooms. The facility has a capacity of six and had a census of zero at the time of this survey.  Calculation of the Evacuation Difficulty Score (E-Score) from the previous facility using NFPA		Provider Number: 15G268 AIM Number: 100243600  Surveyor: Phillip Komsiski, Life Safety Code Specialist  At this Life Safety Code and Environmental Preoccupancy survey, Life Designs Inc. was found in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 32, New Residential Board and Care Occupancies and with 410 IAC 9, Community Residential Facilities for persons with Developmental						
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(E-Score) from the previous facility using NFPA		sprinklered. The facil with smoke detection living areas and hard client rooms. The fac and had a census of	lity has a fire alarm system in the corridors, common wired smoke detectors in all cility has a capacity of six					
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE		(E-Score) from the pr	revious facility using NFPA					

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	A. BUIL	(X2) MULTIPLE CONSTRUCTION  A. BUILDING  02  B. WING		(X3) DATE SURVEY COMPLETED	
		15G268				01/04	4/2013
NAME OF PE	ROVIDER OR SUPPLIER			18	EET ADDRESS, CITY, STATE, ZIP CODE 325 S HIGHLAND AVENUE LOOMINGTON, IN 47401		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PROVIDER'S PLAN OF COI PREFIX (EACH CORRECTIVE ACTION TAG CROSS-REFERENCED TO THE DEFICIENCY)		HOULD BE COMPLETION	
K 000	101A, Alternative App Chapter 6, rated the f E-Score of 1.3.	roaches to Life Safety,	K	000			